

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>HW</i>	<i>32</i>	<i>1-10-03</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	<i>#07635</i>	<i>1-24-06</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		4	12/6
2		4	5/23
3		0303	04
4		✓	✓
5		✓	✓
6		✓	✓
7		✓	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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